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NOTES FROM THE MEDICAL PRESS



IN CHARGE OF
ELISABETH ROBINSON SCOVIL

SCARLET FEVER CARRIERS.—The *New York Medical Journal*, quoting from the *Archives of Pediatrics*, says: Herrman refers to the epidemic of scarlet fever in New York City in 1908 as the most severe and widespread in the history of the city. The mortality was 5.4 per cent., notwithstanding the most extensive sanitary precautions. The author believes there must have been some source of infection which had been overlooked, or which had not received due consideration. He does not think the schools were at fault as has been the case in some epidemics. As to the question of transmission by desquamated scales of epidermis, argument is brought forward to show that this is at least doubtful. Cited cases seem to point to saliva, to the walls and floors of the sick room as carriers of the infectious material whatever it may be. Mild cases may propagate the disease as effectively as severe ones, and any one with a scarlet fever throat may give the disease in virulent form to unprotected children. A discharge from the nose or ear may bear the infective material, hence the greatest care should be given to nasal and oral hygiene. Open wounds should be protected from contact with those who have been exposed to the disease. Disinfection may be unnecessary, but in the existing uncertainty as to the medium of transmission such a procedure cannot be dispensed with.

CAN OPSONIC ESTIMATES BE RELIED ON IN PRACTICE?—The *Medical Record*, in a synopsis of a paper in the *British Medical Journal*, states the following: E. C. Hart says that the work of the Wright school must be reckoned with in clinical medicine, but that it is doubtful whether opsonins represent more than a fractional part in the highly complex machinery of immunity production. Granted that they are the important factor in immunization, the question as to their reliability is still open. Technical considerations of standardization of emulsions, cultural difficulties, agglutination questions, etc., concern only those experts whose responsibility it is to render such technicalities as free from sources of error as possible. They do not affect the practising physician, whose only concern is with the pertinent questions of reliability and cost. As regards cost, everyone knows that it is necessarily high. As to relia-

bility, countless observations have been reported in which the estimations have appeared to be of the highest value in diagnosis and in determining treatment. But such experience is not universal even when securing the best talent among the exponents of the opsonin theories. There appears to be a growing conviction, says the author, that, except possibly in the hands of an extremely small band of experts, the method is not of the general utility with which it has been credited.

CHANGE OF THE SIZE OF THE HEART IN HOT AND COLD BATHS.—The *New York Medical Journal*, quoting from a German contemporary, says: Beck and Dohan report their observations on fourteen patients given baths of different temperatures. In six out of seven given hot baths, from 40° to 45° C., the heart was diminished in size after the bath, in several cases very markedly. After a cold bath the heart was increased in size in four out of five patients and remained the same in only one. In three the enlargement was remarkable. After warm baths in which the warmth did not exceed the body temperature, 35° C., the size of the heart was but slightly diminished.

THE CLAIMS OF WATER AS A THERAPEUTIC AGENT.—Baruch, in his introductory lecture to the course on hydrotherapy at Columbia University, New York, as published in the *Medical Record*, remarks that water stands easily foremost among the physiological remedies. He speaks of water as a stimulant, a tonic, a diuretic, a diaphoretic, an emetic, a purgative, a promoter of metabolism, an antiseptic, and an antipyretic. He gives a very good condensed review of the history of hydrotherapy from Hippocrates to our times.

AN article on "The Management and Treatment of Typhoid" by Dr. J. P. Roach, of Bushnell, Illinois, as reported in the *Journal of the American Medical Association* for April 3, presents some new points of interest. His method of giving baths has for its object, not the reduction of temperature, but the lessening of the toxæmia caused by the disease. The treatment begins as soon as the diagnosis is made, with a catharsis for clearing the intestines of undigested food. After this, without regard to the patient's temperature, baths are given every two hours, from 7 A.M. to 9 P.M.—or 11 P.M., if there is much restlessness. Immediately preceding each bath, the patient is given from 4 to 8 ounces of water; and immediately after, from 2 to 6 ounces of milk, which he is required to sip slowly. The bath is given by means of two large bath towels, squeezed, not wrung, from water of about 60° tem-

perature, a little higher for women and children, or if indicated. The patient at first lies on the back, and the towels are laid over him so as to cover the entire upper surface of the body, remaining for three minutes. He is then turned, and they are applied to the back for the same length of time. The only contraindication to this treatment is severe hemorrhage. These baths have little or no effect on the temperature, but Dr. Roach says there is every evidence that they do eliminate the typhoid toxins. He has been using this method since 1898 with no mortality.

CURRENT LITERATURE OF INTEREST TO NURSES

Medical Record, March 6, "Prevention of Epidemics," Linnott; March 13, note on "Poisoning by Egg," Miller; March 27, "The Röntgen Ray and the Etiology of Cancer," Diffenbach. *New York Medical Journal*, March 6, "Alcohol, Physiological Action and Therapeutic Indications," Kemp; March 20, "Pathological Discovery and its Bearing upon Preventive Medicine," Adami. *New York State Journal of Medicine*, March, "Intramuscular Injections in Syphilis," Rederson. *Maryland Medical Journal*, March, "How the Public Can Help the Medical Profession to Fight Disease," Linthicum. *Yale Medical Journal*, March, "Why is Incipient Pulmonary Tuberculosis so Rarely Recognized?" Stoll. *Journal of the American Medical Association*, March 13, "The Unity of the Medical Sciences," Bristow; "Cancer of the Uterus," Moulton; "A Chapter in the History of Quackery," Walsh; "Ophthalmia Neonatorum and Its Prevention," Lewis, Harper, and Pease; editorials on "Lumbar Puncture," "Biting of Man by Rat Fleas," and "Report of the Homes Commission"; March 20, "A New Douche Pan," Walker; editorial on "School Diphtheria"; March 27, articles on human and bovine tuberculosis and family tuberculosis, Pottenger, Hess, Miller, and Woodruff; "Treatment of Varicose Ulcers by Leggings," Murphy; April 3, "Sanitation of the Tropics with Special Reference to Malaria and Yellow Fever," Gorgas; April 10, "The Suppression of a Cholera Epidemic in Manila," McLaughlin; "Ignorance or Malpractice?" Watkins (a protest against sending indigent tubercular patients away from home). *Nurses' Journal of the Pacific Coast*, April, "The Wreck of the *Æon*," Part 2, Campbell. *The Survey*, April 3, "Relief Work for the Messina Refugees in Syracuse," Davis. *The British Journal of Nursing*, April 3, "Postures in Transverse Presentation," M. O. H. *Charities*, February 27, "The State Hospitals for the Insane," Ferris. *McClure's*, April, "Conquering Spinal Meningitis," Hendrick. *The Outlook*, March 27, "The Greatest Disaster in History," Crawford; "The Doctor of the Labrador," Palmer.